ICE Detention Standards Compliance Review

Lubbock County Detention Center

May 19 - 20, 2008

REPORT DATE - May 29, 2008



Contract Number: ODT-6-D-0001 Order Number: HSCEOP-07-F-01016

Executive Vice President
Creative Corrections
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Beaumont, TX 77706

U.S. Immigration and Customs Enforcement
Detention Standards Compliance Unit
801 I Street NW
Washington, DC 20536

Making a Difference!

May 29, 2008		
MEMORANDUM FOR:	James T. Hayes, Jr., Acting Director Office of Detention and Removal Operations	
FROM:	Reviewer-In-Charge	b6,b7c
SUBJECT:	Lubbock County Detention Center Annual Detention Review	

Creative Corrections conducted an Annual Detention Review of the Lubbock County Detention Center, located in Lubbock, Texas, on May 19-20, 2008. The facility is operated by the County of Lubbock, which has a contract with the United States Marshals Service (USMS). As noted on the attached documents, my team of Subject Matter Experts (SME) also included:

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A review closeout was conducted with Chief Deputy Detention Branch, Major and Lieutenant and included a discussion of all deficiencies and concerns noted during our review

Type of Review:

This review is a scheduled Detention Standard Review to determine general compliance with established ICE National Detention Standards for facilities used for under 72 hours.

Review Summary:

The facility is not currently accredited by the American Correctional Association (ACA), the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) or the National Commission on Correctional Health Care (NCCHC). It is accredited by the Texas Commision on Jail Standards.

Standards Compliance:

The following statistical information outlined provides a direct comparison of the 2007 ADR and this ADR conducted for 2008.

April 30, 2007 Review		May 19-20, 2008 Review		
Compliant	24	Compliant	23	
Deficient	0	Deficient	4	
At-Risk	1	At-Risk	0	
Not-Applicable	2	Not-Applicable	1	

Food Service - Deficient

Every facility will provide detainees in its care with nutritious and appetizing meals, prepared in accordance with the highest sanitary standards.



- Food trays are stained. Weekly sanitation inspections are not conducted by the Food Administrator. The three compartment sink is not marked with the proper washing procedures in both Spanish and English. Baking sheet pans are used to hold up a corner of a serving table. Most of the pots and pans in use have a heavy build up of burnt carbon.
- A single tank dish machine was installed to service the needs of a population of approximately of 750 offenders. During the installation of the dish machine, the installers failed to re-install the ventilation system.

Recommendations



Food trays should be de-stained to remove food stains and placed back in service rather than discarded. A product call "Dip-it" or other similar product should be considered to remove the food stains from the trays.

Signs stating 'Wash,' 'Rinse' and 'Sanitizer' should be placed on each of the sink compartments to distinguish use. The signs should be written in both Spanish and English.

Weekly sanitation inspections should be formalized and used as a tool to teach staff and detainees the importance of proper sanitation. Any deficiencies should be corrected immediately and a copy of the inspection should be forwarded to the Chief Deputy for his review. Baking sheets should not be used as a make-shift table support; the table leg should be adjusted to the proper height. Any sign of burnt carbon on pots and pans should be removed.

The ventilation for the single tank dish machine should be reinstalled to remove excess steam and moisture which could create mold.

Environmental Health and Safety - Deficient

Every facility will control flammable, toxic, and caustic materials through a hazardous materials program. This program will include, among other things, the identification and labeling of hazardous materials in accordance with applicable standards (e.g. National Fire Protection Association [NFPA]; identification of incompatible materials, and safe-handling procedures.

- No system or policy is in place for issuing and maintaining inventories for hazardous chemicals.
- There were no inventories for any hazardous chemicals located throughout the facility.
- Some MSDS files had very old documentation and on occasions during the review MSDS's were not on hand for materials in use.
- No personal protective equipment was available for the handling of chemicals in the laundry.
- Posted fire evacuation plans do not contain any instructions in Spanish. The plans also do not contain locations of emergency equipment.

Recommendations

Facility management should develop a comprehensive Hazardous Chemical Control policy to include storage, issue and inventory. Requirements for MSDS's, PPE, and training as outlined in

OSHA 1910.1200 should also be included. Posted fire evacuation plans should include both English and Spanish instructions and locations of emergency equipment should be noted.

Key and Lock Control - Deficient

It is the policy of the ICE Service to maintain an efficient system for the use, accountability and maintenance of all keys and locks.

- No facility policy or procedure addresses the issue of compromised keys and locks.
- Procedures are not in place to ensure that key rings are identifiable and the numbers of keys are cited.
- The keys are not physically counted daily, nor does the facility use a key accountability system.
- The facility does not have a key accountability policy and procedures to ensure key accountability.

Recommendations

The facility should develop a comprehensive Key and Lock Control Policy to define and describe key ring identification, key issuance/use, key accountability, and protocols for lost or missing keys, all in the interest of general security.

Tool Control-Deficient

It is the policy of all facilities that all employees shall be responsible for complying with the tool control policy. The Maintenance Supervisor shall maintain a computer generated or typewritten Master Inventory list of tools and equipment and the location in which tools are stored. These inventories shall be current, filed and readily available for tool inventory and accountability during an audit.

- The facility does not have a tool classification system. Tools are not classified according to restricted (dangerous/hazardous) and non-restricted (non-hazardous).
- The facility policy and procedure for the issuance of tools to staff is not being followed.

Recommendations

Facility management should develop a comprehensive Tool Control and Accountability Policy to distinguish restricted from non-restricted tools and an oversight system to ensure staff compliance with policy. Training may be profitable when procedures are in place.

Recommended Rating and Justification

It is the Reviewer-in-Charge's (RIC) recommendation that the facility receive a rating of "Deficient."

RIC Assurance Statement

All findings of this review have been documented on the Detention Review Worksheet and are supported by the written documentation contained in the review file.



DETENTION FACILITY INSPECTION FORM

FACILITIES USED LESS THAN 72 HOURS

Estimated Man-days Per Year

A. TYPE OF FACILITY REVIEWED

SME for Food Service

; N/A

Date of Contract or IGSA

CDF/IGSA INFORMATION ONLY

Contract Number

ICE Service Processing Center	658				
ICE Contract Detention Facility	E. ACCREDITATION CERTIFICATES N/A				
ICE Intergovernmental Service Agreement	List all State or National Accreditation[s] received:				
B. CURRENT INSPECTION	Texas Commission on Jail Standards				
Type of Inspection	Toxus Commission	on sun ou	irom do		
Field Office HQ Inspection	F. PROBLEMS/	COMPLAIN	TS (COPIES MUST	BE ATTACHED)	
Date[s] of Facility Review	The Facility is un	der Court O	order or Class Act	ion Finding	
May 19-20,2008	Court Order		Class Action Fir		
11203 17 20311000	The Facility has S				
C. PREVIOUS/MOST RECENT FACILITY REVIEW	☐ Major Litigati	on _	Life/Safety Issue	es	
Date[s] of Last Facility Review	None Non				
April 30, 2007					
Previous Rating	I. FACILITY H	ISTORY			
☐ Superior ☐ Good ☐ Acceptable ☐ Deficient ☐ At-Risk	Date Built				
	1931				
D. NAME AND LOCATION OF FACILITY	Date Last Remod	leled or Upg	raded		
Name	2001				
Lubbock County Detention Center	Date New Constr	uction / Bed	l Space Added		
Address	1987 and 1994				
801 Main Street	Future Construction Planned				
City, State and Zip Code	✓ Yes				
Lubbock, Texas, 79408	Current Bed space Future Bed Space (# New Beds only)				
County	795 Number: 2112 Date: April, 2009				
Lubbock					
Name and Title of Chief Executive Officer	J. TOTAL FACI				
(Warden/OIC/Superintendent)	Total Facility Inta	ike for Previ	ious 12 months		
Chief Deputy, Detention Branch	18488	0. 5			
Telephone Number (Include Area Code)	Total ICE Man D	ays for Prev	rious 12 months		
806 b6,b7c	658				
Field Office / Sub-Office (List Office with Oversight)	K. CLASSIFICAT	CION I EVEL	CE SPCS AND	CDEc ONI V	
Dallas, Texas	K. CLASSIFICA	CONTRACTOR OF THE PERSON OF TH			
Distance from Field Office	Adult Male	L	-1 11-4	L-3	
330 miles	Adult Male Adult Female				
	Adult Female		-	-	
E. Creative Corrections Review Team	L. FACILITY CA	PACITY			
	E. TREIBITT CI	Rated	Operational	Emergency	
b6,b7c Reviewer in Charge	Adult Male	664	559	703	
b6,b7c Reviewer in Charge	Adult Female	131	131	142	
b6,b7c SME for Security			fenders 16 and Ole		
	racinty fiolus	ou vennes Ol	ichucis iv allu Ol	ici as Adults	
b6,b7c SME for Safety	M. AVERAGE DA	AILY POPUL	ATION		
CMTP Court III C	Affine Mary and the same	IC	7	Other	
, SME for Health Services	Adult Male	2		615	

J-D77-M-108	May 1, 1990	b2High	
Basic Rates per Man-D	ay		
\$55.00		2	
Other Charges: (If Nor	e, Indicate N/A)	0 10 10 10 10 10	

Adult Female

Security:

N. FACILITY STAFFING LEVEL

Support:

132

SIGNIFICANT INCIDENT SUMMARY WORKSHEET

In order for Creative Corrections to complete its review of your facility, you <u>must</u> complete the following worksheet prior to your scheduled review dates. This worksheet must contain data for the past twelve months. We will use this worksheet in conjunction with the ICE Detention Standards to assess your detention operations with regard to the needs of ICE and its detainee population. Failure to complete this worksheet will result in a delay in processing this report, and may result in a reduction or removal of ICE detainees from your facility.

INCIDENTS	DESCRIPTION	Jan – Mar	Apr – Jun	Jul – Sep	Oct – Dec
Assault:	Types (Sexual ² , Physical, etc.)	Physical	Physical	Physical	Physical
Offenders on Offenders ¹	With Weapon	0	0	0	0
	Without Weapon	15	7	15	14
Assault:	Types (Sexual Physical, etc.)	Physical	Physical	Physical	Physical
Detainee on Staff	With Weapon	0	0	0	0
	Without Weapon	1	2	1	2
Number of Forced Moves, incl. Forced Cell Moves ³		2	1	1 -	1
Disturbances ⁴		0	0	0	0
Number of Times Chemical Agents Used		2	3	0	1
Number of Times Special Reaction Team Deployed/Used		2	1	0	1
# Times Four/Five Point Restraints Applied/Used	Number/Reason (M=Medical, V=Violent Behavior, O=Other)	1-V	0	0	0
	Type (C=Chair, B=Bed, BB=Board, O=Other)	1-C	0	0	0
Offender / Detainee Medical Referrals as a Result of Injuries Sustained.		2	I	3	2
Escapes	Attempted	0	0	0	0
	Actual	0	0	0	0
Grievances:	# Received	2	2	0	0
	# Resolved in Favor of Offender/Detainee	0	0	0	0
Deaths	Reason (V=Violent, I=Illness, S=Suicide, A=Attempted Suicide, O=Other)	*	Illness		7
	Number	0	1	0	0
Psychiatric / Medical Referrals	# Medical Cases Referred for Outside Care	111	96	79	96
	# Psychiatric Cases Referred for Outside Care	72	75	65	71

Routine transportation of detainees/offenders is not considered "forced"

Any attempted physical contact or physical contact that involves two or more offenders

Oral, anal or vaginal penetration or attempted penetration involving at least 2 parties, whether it is consenting or non-consenting

Any incident that involves four or more detainees/offenders, includes gang fights, organized multiple hunger strikes, work stoppages, hostage situations, major fires, or other large scale incidents.

DHS/ICE DETENTION STANDARDS REVIEW SUMMARY REPORT

1. A	CCEPTABLE	2. DEFICIENT	3. AT-RISK	4. REPEAT FINDING	5. NOT APPLICABLE			3/4		
LEG	AL ACCESS	STANDARDS				1.	2.	3.	4.	5.
1. 2.	Visitation Telephone	Access	o" i i							
DET	AINEE SERV	ICES								
3. 4.	Classificati									
5. 6. 7. 8.	Detainee G	ce Personal Property rievance Procedures								
9. 10.	Issuance an Religious P	d Exchange of Clothi Practices	ng, Bedding, and To	wels		\boxtimes				
HEA	LTH SERVIC	CES								
11.	Medical Ca	0.5								
12.	Suicide Pre	vention and Intervent	ion	No. of the last		M				FE
SECU	URITY AND (CONTROL								
13.	Contraband									
14.	Detention I	Files								
15.	Disciplinar									No.
16.	Emergency									
17.		ntal Health and Safety								
18.		s in Detention Faciliti	ies							
19.	Key and Lo						\boxtimes			
20.	Population					\boxtimes				
21.	Security Ins	•								
22.	•	nagement Units (Adn								E
23.		nagement Units (Disc	ciplinary Segregation)		X				
24.	Tool Contro									
25.		tion (Land management	nt)							\boxtimes
26.	Use of Force			3						
27. 28.		inee Communication ransfer (Added Septer		3)	9.		H			

ALL FINDINGS OF DEFICIENT AND AT-RISK REQUIRE WRITTEN COMMENT DESCRIBING THE FINDING AND WHAT IS NECESSARY TO REACH COMPLIANCE.

RIC REVIEW ASSURANCE STATEMENT

BY SIGNING BELOW, THE REVIEWER-IN-CHARGE (RIC) CERTIFIES THAT:

- 1. ALL FINDINGS OF NON-COMPLIANCE WITH POLICY OR INADEQUATE CONTROLS, AND FINDINGS OF NOTEWORTHY ACCOMPLISHMENTS, CONTAINED IN THIS INSPECTION REPORT, ARE SUPPORTED BY EVIDENCE THAT IS SUFFICIENT AND RELIABLE; AND
- 2. WITHIN THE SCOPE OF THIS REVIEW, THE FACILITY IS OPERATING IN ACCORDANCE WITH APPLICABLE LAW AND POLICY, AND PROPERTY AND RESOURCES ARE BEING EFFICIENTLY UTILIZED AND ADEQUATELY SAFEGUARDED, EXCEPT FOR ANY DEFICIENCIES NOTED IN THE REPORT.

REV	TEWER-IN-CHARGE
Reviewer-In-Charge: (Print Name)	Signature b6,b7c b6,b7c
Title & Duty Location Reviewer in Charge, Creative Corrections	May 20, 2008
	TEAM MEMBERS
Print Name, Title, & Duty Location b6,b7c SME for Security	Print Name, Title, & Duty Location b6,b7c SME for Safety
Print Name, Title, & Duty Location SME for Health Services	Print Name, Title, & Duty Location 56 SME for Food Service
RECOMMENDED RATING: SUPERIOR GOOD ACCEPTABLE DEFICIENT AT-RISK	

COMMENTS: a Federal Bureau of Prisons detainee complained of feeling ill on April 30, 2008. He was taken to a local hospital where he died enroute via cardiac arrest. No further information was available from the facility.

Condition of Confinement Review Worksheet

(This document must be attached to each Inspection Form)

This Form to be used for Inspections of Facilities used less than 72 Hours



Detention Review Worksheet

✓ Local Jail – IGSA✓ State Facility – IGSA
ICE Contract Detention Facility
Name
Lubbock County Detention Center
Address (Street and Name)
801 Main Street
City, State and Zip Code
Lubbock, Texas 79408
County
Lubbock
Name and Title of Chief Executive Officer (Warden/OIC/Superintendent) Chief Deputy
Name and Title of Reviewer-In-Charge
Date[s] of Review
May 19-20, 2008
Type of Review
Headquarters

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TOOL CONTROL
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DETAINEE TRANSFER STANDARD

NOTE: FOR EACH STANDARD RATED <u>BELOW</u> ACCEPTABLE, FACILITIES **MUST** ATTACH A PLAN OF ACTION FOR BRINGING OPERATIONS INTO COMPLIANCE. EACH FACILITY SHOULD EXAMINE THE ENTIRE WORKSHEET TO IDENTIFY AREAS OF IMPROVEMENT, <u>INCLUDING</u> THOSE STANDARDS WHERE AN OVERALL FINDING OF ACCEPTABLE WAS ACHIEVED.

SECTION I. LEGAL ACCESS STANDARDS

VISITATI POLICY: ICE SHALL PERMIT DETAINEES TO VISIT WITH FAMILY, FRIENDS, I		PRESENTA	ITVES, SPE	CIAL INTEREST GROUPS, AND THE NEWS
MEDIA. COMPONENTS	Y	N	NA	REMARKS
There is a written visitation schedule and hours for general visitation.	×			Non-contact visiting is allowed weekly at various times. A visiting schedule is available at each housing unit.
The visitation schedule and rules are available to the public.	\boxtimes			The facility has a telephone center where the public can call to obtain visitation schedules.
A general visitation log is maintained.				
Visitors are searched and identified according to standard requirements.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING

No policy exists regarding visiting. Non-contact visiting is allowed weekly at various times. Visiting is scheduled per cell numbers, with two visits per week for a 25 minute duration each. The visiting schedule is available at each housing unit. The facility has a telephone center where the public can call to obtain visitation schedules.

b6,b7c / May 20, 2008	b6,b7c	b6,b7c
AUDITOR'S SIGNATURE / DAT	E	

DETAINEE TELEPHONE ACCESS							
POLICY: ALL FACILITIES HOUSING ICE DETAINEES WILL PERMIT DETAINEES' REASONABLE AND EQUITABLE ACCESS TO TELEPHONES.							
COMPONENTS	Y	N	NA	REMARKS			
Detainees are allowed access to telephones during established facility waking hours.				Phones are available in the detainee housing areas from approximately 8:00 AM to 10:00 PM daily.			
Upon admittance, detainees are made aware of the facility's telephone access policy.	\boxtimes			Telephone procedures are addressed in the handbook.			
Detainees are afforded a reasonable degree of privacy for legal phone calls.				Phones are located in a common area that provides a reasonable degree of privacy.			
Emergency phone call messages are immediately given to detainees.	\boxtimes						
Detainees are allowed to return emergency phone calls as soon as possible.	\boxtimes						
Detainees in disciplinary segregation are allowed phone calls to consular/embassy officials.				Staff make arrangements for detainees to contact their Consular/Embassy as needed.			
The OIG phone number for reporting abuse is programmed into the detainee phone system and the phone number was checked by the inspector during the review.				The OIG phone number is not available to the detainee population.			
Detainees in disciplinary segregation are allowed phone calls for family emergencies.				Phone calls are afforded to detainees in disciplinary segregation on an as needed basis for family emergencies.			
Detainees in administrative segregation and protective custody are afforded the same telephone privileges as those in general population.	\boxtimes			Detainees in administrative segregation and protective custody are afforded daily telephone calls.			
When detainee phone calls are monitored, notification is posted by detainee telephones that phone calls made by the detainees may be monitored. Special Access calls are not monitored.				The phone system contains an automated notification that telephones are monitored.			
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING							

Policy and Procedures Manual section #9.06, entitled "Telephone Use," dated July 26, 2004, provides guidance to staff regarding telephone usage. Detainees are allowed access to telephones during the facility's operational hours from 8:00 AM until 10:30 PM. Telephone procedures are posted in the handbook. At least one phone is available for 25 detainees. Phones are located in a common area that provides a reasonable degree of privacy. The OIG phone number is not available to the detainee population. The phone system contains an automated notification that telephones are monitored.

	7.	
h6,b7c / May 20, 2008 AUDITOR'S SIGNATURE / D.	b6,b7c	b6,b7c

SECTION II. DETAINEE SERVICES STANDARDS

ADMISSION AND RELEASE

POLICY: ALL DETAINEES WILL BE ADMITTED AND RELEASED IN A MANNER THAT ENSURES THEIR HEALTH, SAFETY, AND WELFARE. THE ADMISSIONS PROCEDURE WILL, AMONG OTHER THINGS INCLUDE: MEDICAL SCREENING; A FILE-BASED ASSESSMENT AND CLASSIFICATION PROCESS; A BODY SEARCH; AND A SEARCH OF PERSONAL BELONGINGS, WHICH WILL BE INVENTORIED, DOCUMENTED, AND SAFEGUARDED AS NECESSARY.

COMPONENTS	Y	N	NA	REMARKS
In-processing includes an orientation of the facility.	\boxtimes			
Medical screenings are performed by medical staff <u>or</u> persons who have received specialized training for the purpose of conducting an initial health screening.				Medical screenings are conducted by trained staff.
All new arrivals are searched in accordance with the "Detainee Search" standard. An officer of the same sex as the detainee conducts the search and the search is conducted in an area that affords as much privacy as possible.				All new arrivals are searched in accordance with the detainee search standards.
Detainees are stripped searched only when cause has been established and not as routine policy. Non-criminal detainees are not strip-searched but are patted down, unless reasonable suspicion is established.				Detainees are stripped searched only when cause has been established.
The "Contraband" standard governs all personal property searches. IGSAs/CDFs use or have a similar contraband standard. Staff prepares a complete inventory of each detainee's possessions. The detainee receives a copy.				Property is inventoried and secured. Receipts for personal items and valuables are issued and signed for by the detainees.
Two officers are present during the processing of detainee funds and valuables during admissions processing to the facility. Both officers verify funds and valuables.				Two officers are present during the processing of detainee funds only when the amount of funds exceeds \$300.
Staff completes Form I-387 or similar form for CDFs and IGSAs for every lost or missing property claim. Facilities forward all I-387 claims to ICE.	\boxtimes			
Detainees are issued appropriate and sufficient clothing and bedding for the climatic conditions.				Detainees are issued appropriate clothing and bedding.
The facility provides and replenishes personal hygiene items as needed. Gender-specific items are available. ICE Detainees are not charged for these items.				Detainees are issued personal hygiene items.
All releases are properly coordinated with ICE using a Form I-203.	\boxtimes			
Staff completes paperwork/forms for release as required.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-R	ISK		REPEAT FINDING

REMARKS:

In-processing provides critical information to detainees regarding the facility operations and programs. The detainee handbook is issued at this orientation. Medical screenings are conducted by trained staff with LPN's available to answer questions. New Arrivals are classified upon arrival. Detainees are stripped searched only when cause has been established. Property is inventoried and secured. Two officers are present during the processing of detainee funds only when the amount of funds exceeds \$300. Detainees are issued appropriate clothing and bedding. Detainees are issued personal hygiene items.

AUDITOR'S SIGNATURE / DALL

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CLASSIFICATIO	NSYSTI	EM			
POLICY: ALL FACILITIES WILL DEVELOP AND IMPLEMENT A SYSTEM CLASSIFICATION SYSTEM WILL ENSURE THAT EACH DETAINEE IS PLACED DETAINEES IN OTHER CATEGORIES					
COMPONENTS	Y	N	NA	REMARKS	
The facility has a system for separating criminal and non-criminal ICE detainees. Violent offenders are separated from non-violent offenders.				The facility has a system for separating criminal and non-criminal ICE detainees.	
Housing assignments are based on threat level.				Housing unit assignments are based on classification level and a housing plan.	
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					

The facility has a system for separating criminal and non-criminal ICE detainees. Housing unit assignments are based on classification level and a housing plan.

b6,b7c May 20, 2008 AUDITOR'S SIGNATURE / DATE

DETAINEE HANDBOOK POLICY: EVERY OIC WILL DEVELOP A SITE-SPECIFIC DETAINEE HANDBOOK TO SERVE AS AN OVERVIEW OF, AND GUIDE TO, THE DETENTION POLICIES, RULES, AND PROCEDURES IN EFFECT AT THE FACILITY. THE HANDBOOK WILL ALSO DESCRIBE THE SERVICES, PROGRAMS, AND OPPORTUNITIES AVAILABLE THROUGH VARIOUS SOURCES, INCLUDING THE FACILITY, ICE, PRIVATE ORGANIZATIONS, ETC. EVERY DETAINEE WILL RECEIVE A COPY OF THIS HANDBOOK UPON ADMISSION TO THE FACILITY. COMPONENTS Y NA REMARKS The detainee handbook is written in English and translated into Spanish, Handbook revised in January, X or into the next most-prevalent Language(s). 2008. The detainee handbook states in clear language the basic detainee X responsibilities. The handbook identifies: Initial issue of clothing and bedding, and personal hygiene items; The telephone information does When a medical examination will be conducted; not include procedures for The telephone policy, debit card procedures, direct and free telephone use when the demand is calls, locations of telephones, policy when telephone demand is M high. Information on facility high, Policy and procedures for emergency phone calls, and the visiting hours and schedule, along Detainee Message System; with visiting rules and regulations Facility search procedures and contraband policy; and are not included. Facility visiting hours and schedule, and visiting rules and regulations The handbook describes the detainee disciplinary policy and procedures, to include: Prohibited acts and severity scale sanctions; Time limits in the Disciplinary Process; \boxtimes Summary of Disciplinary Process; Sick call procedures for general population and segregation; and The rights and responsibilities of all detainees.

REMARKS:

The handbook does not include required elements for telephone procedures when the demand is high. The handbook also needs to include specifics on visiting hours and visiting rules and regulations.

AT-RISK

REPEAT FINDING

DEFICIENT

b6,b7c / May 20, 2008 AUDITOR'S SIGNATURE / DA	b6,b7c	b6,b7c	for
			0

ACCEPTABLE

FOOD SERVICE POLICY: EVERY FACILITY WILL PROVIDE DETAINEES IN ITS CARE WITH NUTRITIOUS AND APPETIZING MEALS, PREPARED IN ACCORDANCE WITH THE HIGHEST SANITARY STANDARDS. NA COMPONENTS REMARKS Trained staff supervises the food service program. Food Service at the Lubbock County Jail is contracted with Mid-America Services who has X their management team running Food Service. The manager is knowledgable and experienced. Knives are not secured in a Knife cabinets close with an approved locking device and the on-duty lockable cabinet or locker to cook foreman maintains control of the key that locks the device. maintain accountability X control of knives. Knives are stored in a damaged file cabinet that can not be secured. All knives not in a secure cutting room are physically secured to the All knives have tethers attached to X workstation and staff directly supervises detainees using knives at these them and are secured to a work workstations. Staff monitor the condition of knives and dining utensils station during use. Detainees are served at least three meals daily. No more than 14 hours X elapse between the last meal served and the first meal of the following day. A registered dietitian conducts a complete nutritional analysis of every Dianne Perez registered Dietitian master-cycle menu planned. for SureQuest Systems License # DT02955 compliled and signed the nutritional analysis on the 4 X master cycle menus. she signed each of the 4 weekly menus and the cover letter. Ms. Perez's license expires 6-30-08

M

The food service program addresses medical diets.

Satellite-feeding programs follow guidelines for proper sanitation.

Food

Service does prepare

medical diets that are prescribed by the facility's medical doctor.

There are a number of concerns in the area of sanitation that should be addressed ie: Food trays in use should be destained and put back

THE HIGHEST SANITARY STANDARDS. COMPONENTS	Y	N	NA NA	REMARKS
Hot and cold foods are maintained at the prescribed, "safe" temperature(s) after two hours. (140 degrees for hot – 40 degrees for cold)				Hot foods were plated at 150 degrees or above and cold foods were plated at 42 degrees of below. Trays were plated and transported to the housing units and service.
All meals are provided in nutritionally adequate portions.				
Food is not used to punish or reward detainees based upon behavior.	\boxtimes			
Standard operating procedures include weekly inspections of all food service areas, including dining and food-preparation areas and equipment.				Weekly sanitation inspections are not being done in a formal manner. The county health departmen conducts health inspections every six months and they are current.
Equipment is inspected daily.				
Procedures include inspecting all incoming food shipments for damage, contamination, and pest infestation.	\boxtimes			
Storage areas are locked.	\boxtimes			
☐ ACCEPTABLE ☐ DEFICIENT ☐ AT-RISK		REP	EAT FIND	DING
REMARKS:			#	
b2High				
b2High Ther	e are a n	umber of	concerns in	the area of sanitation that should be

FOR OFFICIAL USE ONLY (LAW ENFORCEMENT SENSITIVE)

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FUNDS AND PERSONA	LPROP	ERTY		
POLICY: ALL FACILITIES WILL IMPLEMENT PROCEDURES TO CONTROL AND PROVIDE FOR THE SECURE STORAGE OF FUNDS, VALUABLES, BAGGAGE RECEIPTING OF SURRENDERED PROPERTY; AND THE INITIAL AND REGULAR OTHER PROPERTY. STANDARD NA: (IGSA ONLY) CHECK THIS BOX IF ALL ICE DETAIN THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL	AND OTH LY SCHEI EE FUNDS	ER PERSO DULED INV	ONAL PROVENTORY BLESANI	PERTY; THE DOCUMENTATION AND ING OF ALL FUNDS, VALUABLES, AND
COMPONENTS	YES	No	NA	REMARKS
Detainee funds and valuables are properly separated, stored, and are accessible only by designated supervisor(s).	\boxtimes			
Detainees' large valuables are secured in a location accessible to designated supervisor(s) or processing staff only.	\boxtimes			
Two officers are present during the processing of detainee funds and valuables during in-processing to the facility. Both officers verify funds and valuables.				Two officers are not present during the processing of detainee's funds unless it is over \$300.00. They do have a system in place to cross check what was taken through the facility's trust fund system.
Staff forwards an arriving detainee's medicine to the medical staff.	\boxtimes			
Staff searches arriving detainees and their personal property for contraband.	\boxtimes			
Staff procedures follow written policy for returning forgotten property to detainees.	\boxtimes			
Property discrepancies are immediately reported to the CDEO or Chief of Security.	\boxtimes			ALTHUR ET
CDF/IGSA facility procedures for handling detainee property claims are similar with the ICE standard.	\boxtimes			

ACCEPTABLE

Lubbock County Jail implemented procedures to control and safeguard detainees' personal property. Procedures will provide for the secure storage of funds, valuables, baggage and other personal property; the documentation and receipting of surrendered property; and the initial and regularly scheduled inventorying of all funds, valuables, and other property.

REPEAT FINDING

AT-RISK

Two officers are not present during the processing of detainee's funds unless it is over \$300.00.



DEFICIENT

DETAINEE GRIEVANCE PROCEDURES

POLICY: EVERY FACILITY WILL DEVELOP AND IMPLEMENT STANDARD OPERATING PROCEDURES (SOPS) FOR ADDRESSING DETAINEE GRIEVANCES IN TIMELY FASHION. EACH STEP IN THE PROCESS WILL OCCUR WITHIN THE PRESCRIBED TIME FRAME. AMONG OTHER THINGS, A GRIEVANCE WILL BE PROCESSED, INVESTIGATED, AND DECIDED (SUBJECT TO APPEAL) IN ACCORDANCE WITH THE SOPS; A GRIEVANCE COMMITTEE WILL CONVENE AS PROVIDED IN THE SOPS. STANDARD PROCEDURE WILL INCLUDE PROVIDING THE DETAINEE WITH A WRITTEN RESPONSE TO ANY FORMAL GRIEVANCE, WHICH WILL INCLUDE THE BASIS FOR THE DECISION. THE FACILITY WILL ALSO ESTABLISH STANDARD PROCEDURES FOR HANDLING EMERGENCY GRIEVANCES. ALL GRIEVANCES WILL RECEIVE SUPERVISORY REVIEW. REPRISAL AGAINST THE FILER OF A GRIEVANCE WILL NOT BE TOLERATED.

COMPONENTS	Y	N	NA	REMARKS
Every member of the staff knows how to identify emergency grievances, including the procedures for expediting them.				Inmate Grievances, Section 14, dated 07/23/2004 states that detainees may write on the grievance envelope if the issue or concern is an emergency.
There are documented or substantiated cases of staff harassing, disciplining, penalizing, or otherwise retaliating against a detainee who lodged a complaint: • If yes, explain.				Cases involving staff are investigated.
Procedures include maintaining a Detainee Grievance Log. If not, an alternative acceptable record keeping system is maintained. "Nuisance complaints" are identified in the records. For quality control purposes, staff document nuisance complaints received but not filed.				All grievances are being logged.
Staff is required to forward any grievance that includes officer misconduct to a higher official or, in a CDF/IGSA facility, to ICE.				This information is not currently included in Lubbock County Sheriff's Policy and Procedure Manual.
ACCEPTABLE DEFICIENT	AT-RI	SK		REPEAT FINDING

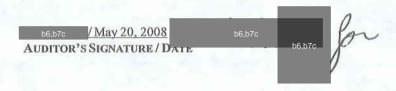
REMARKS:

Current Lubbock County Sheriff's Detention Division Policy and Procedure Manual does not require staff to forward any detainee grievance that includes officer misconduct to ICE.

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ISSUANCE AND EXCHANGE OF CLOTHING, BEDDING, AND TOWELS POLICY: ICE REQUIRES THAT ALL FACILITIES HOUSING ICE DETAINEES PROVIDE CLEAN CLOTHING, BEDDING, LINENS AND TOWELS TO EVERY ICE DETAINEE UPON ARRIVAL. FURTHER, FACILITIES SHALL PROVIDE ICE DETAINEES WITH REGULAR EXCHANGES OF CLOTHING, LINENS, AND TOWELS FOR AS LONG AS THEY REMAIN IN DETENTION. YES No NA COMPONENTS REMARKS All new detainees are issued clean, temperature-appropriate, presentable Information included in Inmate X Handbook. clothing during in-processing. New detainees are issued clean bedding, linens, and a towel. Issued items noted in Inmate X Handbook. ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING

REMARKS:



RELIGIOUS PRA POLICY: FACILITIES WILL PROVIDE ICE DETAINEES OF ALL FAITHS WITH RE PRACTICES OF THEIR FAITH, LIMITED ONLY BY THE CONSTRAINTS OF SAFE BUDGETARY CONSIDERATIONS.	EASONAE	BLE AND EC		
COMPONENTS	Y	N	NA	REMARKS
Detainees are allowed to engage in religious services.				2 CONTRACTOR CONTRACTO
The facility allows detainees to observe the major "holy days" of their religious faith.				
Each detainee is allowed religious items in his/her immediate possession.				Detainee's are not permitted to to have a religious item with them other than the religious material the jail provides.
ACCEPTABLE DEFICIENT AT-RISK		REP	EAT FIN	DING

Lubbock County Jail provides ICE detainees of all faiths with reasonable and equitable opportunities to participate in the practices of their faith, limited only by the constraints of safety, security, the orderly operations of the facility and budgetary considerations.

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SECTION III. HEALTH SERVICES STANDARDS

ACCESS TO MEDICAL CARE

POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED/ACCREDITATION-WORTHY HEALTH PROGRAM FOR THE GENERAL WELL-BEING OF ICE DETAINEES.

COMPONENTS	Y	N	NA	REMARKS
Facilities operate a health care facility in compliance with state and local laws and guidelines.	\boxtimes			Lubbock County Detention Center conforms to the State of Texas Department of Corrections Jail guidelines. Medical services are provided by contract agency, Physicians Network Association (PNA). The PNA policies and procedures are directly referenced to the corresponding NCCHC standard(s).
The facility's in-processing procedures for arriving detainees include medical screening.				
All detainees have access to and receive medical care.	\boxtimes			Access to medical care is described in section 7 of the Inmate Handbook. Medical Services provided are outlined in the PNA Medical Policy and Procedure, A-01 "Access to Medical Care" and in E-07 "Non-Emergency Health Care".
Pharmaceuticals are stored in a secure area.	\boxtimes			
Medical screening includes a Tuberculosis (TB) test.				Detainees are screened for positive symptoms of tuberculosis. PPD screening method is used for detainees who stay longer than 72 hours with chest x-ray verification for positive PPD findings.
Detainees in the Special Management Unit have access to health care services.				Nurses make rounds on all units including segregation.
The facility has a written plan for the delivery of 24-hour emergency health care when no medical personnel are on duty at the facility, or when immediate outside medical attention is required.				Emergency procedures are outlined in the Lubbock County Jail policy, chapter 273, section under Medical Services - Emergencies. There is 24-hour nursing coverage, 7 days per week. The HSA is on call after business hours and she has telephonic contact with the medical director as needed, 24
).*			hours per day, 7 days per week.
Detention staff is trained to respond to health-related emergencies within a 4-minute response time.				There is 24-hour nursing coverage and available to respond within 4 minutes to any medical emergency. All medical staff have current CPR certifications on file. CPR certification is voluntary for the correctional staff.

ACCESS TO MEDIO	CAL CAR	E		
POLICY: EVERY FACILITY WILL ESTABLISH AND MAINTAIN AN ACCREDITED WELL-BEING OF ICE DETAINEES.	/ACCREDI	TATION-W	ORTHY F	IEALTH PROGRAM FOR THE GENERAL
Where staff is used to distribute medication, a health care provider properly trains these officers.				Only the nursing staff distributes medications.
The medical unit keeps written records of medication that is distributed.	\boxtimes			
Detainees are required to sign a refusal to consent form when medical treatment is refused.	\boxtimes			Policy I-05 and I-06 addresses Informed Consent and Right to Refuse medical treatment.
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING				

Lubbock County Detention Center conforms to the Department of Corrections' (DOC) State of Texas Jail guidelines. Medical services are provided by a contract medical group, Physicians' Network Association, (PNA). PNA medical policies are directly referenced to the National Commission on Correctional Health Care (NCCHC) standards.

Interview with the HSA indicates medical staffing is at full complement. Current staffing consists of the Health Services Administrator (HSA) who is a Licensed Vocational Nurse (LVN), 3 staff LVNs, two certified Paramedics, 3 Emergency Medical Technicians (EMTs), 12 Medical Technicians (MedTechs). The Regional Registered Nurse for PNA visits the facility weekly and is also available for phone consultation 7days per week, 24 hours per day as needed. A licensed physician comes to the facility four hours a week to conduct physical examinations and address sick call referrals. The PNA medical policy and procedure manual states: "All medical services are provided under the supervision of a physician". LVNs are covered under a set of Nursing Protocols and Procedures, signed by Dr. Medical Director. A contract psychologist visits the facility once a week and has access to the University Medical Center (UMC) psychiatrist for directions. Adjustment of psychotropics is ordered by the UMC staff psychiatrist. Medications are distributed by the LVNs and MedTechs. All MedTechs have medication administration training in their personnel folders as outlined in PNA policy C-05, "Medication Administration Training". All nursing staff, EMTs and MedTechs have current American Heart Association CPR certifications.

Intake medical and mental health screening is conducted by the officers at booking area. All officers receive training in conducting the initial screening during the initial Basic Jail Training course. Initial screening data is noted in the computerized "Screening Form for Suicide and Medical and Mental Impairments" form. Interview with the officers at booking area indicates any positive findings are immediately referred to the nursing staff on duty who interviews the detainee and the initial screening is finished by the nursing staff. Interview with the LVNs and HSA indicates all intake screening forms are reviewed by the nursing staff on each shift.

Access to medical services is outlined in the inmate handbook and in the PNA policy A-01 "Access to Care" and policy E-07 "Non-Emergency Health Care". Detainees have access to the "Request for Medical Attention" forms (also known as KITES or sick call slips) which are available in all housing units including the disciplinary segregation section. Nursing staff makes rounds daily on all housing units and collects all KITES.

The "Request for Medical Attention" form is available only in English at the time of this review. A Spanish version is currently being formulated by PNA.

Detainees are screened for signs and symptoms of tuberculosis at intake screening evaluations. PPD screening is not used to screen for tuberculosis (TB) for the detainees do not stay the required 72 hours to complete the tests. PPD screening is used for detainees who stay longer than 72 hours with chest x-ray verification for positive PPD findings. Detainees with symptoms are isolated in the designated cells pending chest x-ray verification, and if needed, will be sent to the local emergency room for additional diagnostic testing and treatment not available at this facility. Treatment of a detainee with positive TB will be conducted and monitored by the Texas Public Health Department.



SUICIDE PREVENTION AN POLICY: ALL DETENTION STAFF WORKING WITH ICE DETAINEES WILL BE				CIDE DIEV DIDICATORS STAFF WILL
HANDLE POTENTIALLY SUICIDAL INDIVIDUALS WITH SENSITIVITY, SUPERVIRECEIVE PREVENTIVE SUPERVISION AND TREATMENT.		REFERRA	als. Aci	INICALLY SUICIDAL DETAINEE WILL
COMPONENTS	Y	N	NA	REMARKS
Every new staff member receives suicide-prevention training. Suicide-prevention training occurs during the employee orientation program.	\boxtimes			Suicide prevention topic is mandatory at initial academy training and during the annual refresher courses.
Training prepares staff to: Recognize potentially suicidal behavior; Refer potentially suicidal detainees, following facility procedures; and Understand and apply suicide-prevention techniques.				Review of the facility's lesson outline on "Suicide Prevention and Identification" meets this standard.
ACCEPTABLE DEFICIENT	AT-RIS	K		REPEAT FINDING

Upon employment, all staff received a two-hour Suicide Prevention and Identification training in addition to the mandatory Suicide Prevention course at the Basic Jail Training. Suicide Prevention is also a mandatory topic during the annual refresher training. All detainees are screened for suicide risk and referred to a health care provider as needed. The facility has access to the staff at Sunrise Canyon Mental Health Facility which is also known as State of Texas Mental Health/Mental Retardation Center (MHMR). All detainees with history of psychiatric or mental disorders or exhibiting risk for suicide will be placed on watch status and immediately referred to MHMR staff for evaluation. Lubbock County Jail has computer ability to check if a detainee is currently assigned to an MHMR case worker. Per Lubbock County Jail policy "Mental Disabilities/Suicide Prevention Plan", the MHMR case worker(s) assigned to a detainee(s) will be notified of the admission of the detainee and the case worker(s) are allowed to visit the detainee(s) daily during their commitment in Lubbock County Jail. MHMR case workers are immediately notified of detainees on suicide watch. The case workers come to the facility daily to assess and monitor all detainees on suicide watch. MHMR staff utilizes the services their psychiatrist who is allowed to give psychiatric orders for the detainee(s) as needed.

A contract psychologist comes to the facility weekly who works with the MHMR case workers for classification and housing issues. Per the HSA, the psychiatrist at MHMR supervises the psychiatric care and management of all detainees with MHMR case workers.

There were no ICE detainees on suicide watch at the time of the review.

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SECTION IV. SECURITY AND CONTROL

CONTRABA	ND			
POLICY: ALL DETENTION FACILITIES WILL ENSURE THE PROPER HANDLI CONTRABAND DESTRUCTION IS REQUIRED.	NG AND E	DISPOSAL	OF ALL C	CONTRABAND. DOCUMENTATION OF
COMPONENTS	Y	N	NA	REMARKS
The facility follows a written procedure for handling illegal contraband. Staff inventory, hold, and report it when necessary to the proper authority for action/possible seizure.				Lubbock County Detention Center, Policy and Procedure Manual, Contraband section 11.09, does not reference procedures for handling illegal contraband. Staff inventory, hold, and report it when necessary to the proper authority for action/possible seizure.
Upon admittance, detainees receive notice of items they can and cannot possess.	\boxtimes			The Detainee Handbook provides this information.
ACCEPTABLE DEFICIENT	AT-RIS	K		REPEAT FINDING

The facility policy on contraband does not reference procedures for handling illegal contraband. Staff inventory, hold, and report it when necessary to the proper authority for action/possible seizure.

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DETENTION FILES

POLICY: EVERY FACILITY WILL CREATE A DETENTION FILE FOR EVERY ICE DETAINEE BOOKED INTO THE FACILITY, EXCLUDING ONLY DETAINEES SCHEDULED TO DEPART WITHIN 24 HOURS. THE DETENTION FILE WILL CONTAIN COPIES AND, IN SOME CASES, THE ORIGINAL OF SPECIFIED DOCUMENTS CONCERNING THE DETAINEE'S STAY IN THE FACILITY: CLASSIFICATION SHEET, MEDICAL QUESTIONNAIRE, PROPERTY INVENTORY SHEET, DISCIPLINARY DOCUMENTS, ETC.

COMPONENTS	Y	N	NA	REMARKS
A detention file is created for every new arrival whose stay will exceed 24 hours.	\boxtimes			Detention files are created for all detainees.
The detainee detention file contains either originals or copies of documentation and forms generated during the admissions process.	\boxtimes			Detention files contain appropriate materials.
The detainee's detention file also contains documents generated during the detainee's custody.				A review of all federal detainees
 Special requests Any G-589s and/or I-77s closed-out during the detainee's stay Disciplinary forms/Segregation forms Grievances, complaints, and the disposition(s) of same 	\boxtimes			(nine detainees) indicates files contain all documents generated during the detainee's custody.
The detention files are located and maintained in a secure area. If not, the cabinets are lockable and distribution of the keys is limited to supervisors.				Detention files contained in a secure area with limited access.
The detention file remains active during the detainee's stay. When the detainee is released from the facility, staff adds copies of completed release documents, the original closed-out receipts for property and valuables, the original I-385 or equivalent, and other documentation.	\boxtimes			Detention files remain active during the stay at the facility. When detainees are released all materials are appropriately filed.
The officer closing the detention file makes a notation that the file is complete and ready to be archived.	\boxtimes			
Staff makes copies and sends documents from the file when properly requested by supervisory personnel at the receiving facility or office.	\boxtimes			
Appropriate staff has access to the detention files, and other departmental requests are accommodated by making a request for the file. Each file is properly logged out and in by a representative of the responsible department.	\boxtimes			Appropriate staff has access to detention files.
ACCEPTABLE DEFICIENT	AT-RISH	ζ.		REPEAT FINDING

REMARKS:

Detention files are created for all detainees. A review of all federal detainees (nine detainess) indicates files contain all documents generated during the detainee's custody. Detention files contained in a secure area with limited access. Detention files remain active during the stay at the facility. Appropriate staff has access to detention files.

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DISCIPLINARY POLICY DISCIPLINARY POLICY						
POLICY: ALL FACILITIES HOUSING ICE DETAINEES ARE AUTHORIZED TO IMPOSE DISCIPLINE ON DETAINEES WHOSE BEHAVIOR IS NOT IN COMPLIANCE WITH FACILITY RULES AND REGULATIONS.						
COMPONENTS	Y	N	NA	REMARKS		
The facility has a written disciplinary system using progressive levels of reviews and appeals.				Lubbock County Detention Center, Policy and Procedure Manual: Section 13, Inmate Disciplinary Procedures, outlines the facility discipline system.		
The facility rules state that disciplinary action shall not be capricious or retaliatory.	\boxtimes					
Written rules prohibit staff from imposing or permitting the following sanctions:						
The rules of conduct, sanctions, and procedures for violations are defined in writing and communicated to all detainees verbally and in writing.	\boxtimes			Detainees are not informed verbally of the rules of conduct. The information is contained in the Inmates' Handbook.		
The following items are conspicuously posted in Spanish and English, and other dominate languages used in the facility: • Rights and Responsibilities • Prohibited Acts • Disciplinary Severity Scale • Sanctions		×		An inspection of all detainees' living areas revealed the discipline criteria is not posted conspicuously in Spanish and English in the facility. However, the facility provides this information in the Detainees' Handbook which is a Spanish and English document.		
When minor rule violations or prohibited acts occur, informal resolutions are encouraged.						
ACCEPTABLE DEFICIENT	AT-RISE			REPEAT FINDING		

A review of the discipline policy and practical application of the process revealed staff are well-trained, proficient and knowledgeable of the discipline process. Review indicates that rights and responsibilities, prohibited acts, disciplinary scale and sanctions are written in the Detainee Handbook which is a Spanish and English document.

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THE HARMING OF HUMAN LIFE AND THE DESTRUCTION OF PROPERTY. IT IS REC MEMORANDUM OF UNDERSTANDING (MOU), WITH FEDERAL, LOCAL AND ST COMPONENTS				
Policy precludes detainees or detainee groups from exercising control or authority over other detainees.				Emergency Plans clearly outline that staff have complete authority and control.
Detainees are protected from: - Personal abuse - Corporal punishment - Personal injury - Disease - Property damage - Harassment from other detainees				
Written procedures cover: Work/Food Strike Disturbances Escapes Bomb Threats Adverse Weather Facility Evacuation Internal Hostages				There is no policy concerning emergency contingency plans covering the following areas: work/food strike, bomb threats, and internal hostages.
ACCEPTABLE DEFICIENT	AT-RISK			REPEAT FINDING
REMARKS: There is no policy concerning emergency contingency plans covering the foll hostages.	owing are	as: work	z/food str	rike, bomb threats, and internal

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ENVIRONMENTAL HEALTH AND SAFETY

POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES

COMPONENTS	Y	N	NA	REMARKS
The facility has a system for storing, issuing, and maintaining inventories of hazardous materials.				There is no policy or system for maintaining inventories of hazardous materials.
Constant inventories are maintained for all flammable, toxic, and caustic substances used/stored in each section of the facility.				No inventories of any chemicals in areas such as laundry, living units or maintenance shops were noted.
The manufacturer's Material Safety Data Sheet (MSDS) file is up-to-date for every hazardous substance used.				There was confusion as to what department maintains the master MSDS file. Recommend MSDS files, folders and notebooks throughout the facility be reviewed and updated to ensure current MSDS sheets are in place.
All personnel using flammable, toxic, and/or caustic substances follow the prescribed procedures. They: • Wear personal protective equipment; and • Report hazards and spills to the designated official.				Personal protective equipment needs to be available for detainees in the laundry.
The MSDSs are readily accessible to staff and detainees in work areas.				MSDSs were located in units and work areas.
 Hazardous materials are always issued under proper supervision. Quantities are limited; and Staff always supervises detainees using these substances. 	\boxtimes			Chemical amounts are kept minimal.
The facility has sufficient ventilation, and provides and ensures clean air exchanges throughout all buildings.	\boxtimes			No particular problems were noted in the living units during the review.
Vents, return vents, and air conditioning ducts are not blocked or obstructed in cells or anywhere in the facility.				A few vents were blocked but overall, most were clear.
Living units are maintained at appropriate temperatures in accordance with industry standards. (68 to 74 degrees in the winter and 72 to 78 degrees in the summer.)				No concerns were noted with temperatures in the living units.
Shower and sink water temperatures do not exceed the industry standard of 120 degrees.				
Staff directly supervise and account for products with methyl alcohol. Staff receives a list of products containing diluted methyl alcohol, e.g., shoe dye. All such products are clearly labeled. "Accountability" includes issuing such products to detainees in the smallest workable quantities.				No methyl alcohol was noted during the review.
A technically qualified officer conducts the fire and safety inspections.				Several officers who conduct inspections have volunteer fire department experience.
The facility has an approved fire prevention, control, and evacuation plan.	\boxtimes			A memo that outlines fire procedures for Lubbock County Jail was issued by Sheriff David Gutierrez.

ENVIRONMENTAL HEALTH AND SAFETY

POLICY: EVERY FACILITY WILL CONTROL FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS THROUGH A HAZARDOUS MATERIALS PROGRAM. THE PROGRAM WILL INCLUDE, AMONG OTHER THINGS, THE IDENTIFICATION AND LABELING OF HAZARDOUS MATERIALS IN ACCORDANCE WITH APPLICABLE STANDARDS (E.G., NATIONAL FIRE PROTECTION ASSOCIATION [NFPA]); IDENTIFICATION OF INCOMPATIBLE MATERIALS, AND SAFE-HANDLING PROCEDURES

COMPONENTS	Y	N	NA	REMARKS
 The plan requires: Monthly fire inspections; Fire protection equipment strategically located throughout the facility; Public posting of emergency plans with accessible building/room floor plans; Exit signs and directional arrows; and An area-specific exit diagram conspicuously posted in the diagrammed area. 				Monthly fire inspections are being conducted. Documentation was reviewed for the past four months. Exit/evacuation diagrams do not contain locations of emergency equipment. Several of them were also not posted in Spanish.
Written procedures regulate the handling and disposal of used needles and other sharp objects.	\boxtimes			Procedures are in place and infectious waste is picked up by a contract firm named American Medical Waste.
Standard cleaning practices include: Using specified equipment; cleansers; disinfectants and detergents. An established schedule of cleaning and follow-up inspections.				Basic cleaning procedures are in place, however a number of showers were in poor physical repair and sanitary condition. Many shower ceiling areas were in poor repair. The shower in B-4 appeared to have mold on the ceiling. Several ceilings in the annex dorms had extensive peeling paint. Sanitation throughout the facility was fair.
 A licensed/Certified/Trained pest-control professional inspects for rodents, insects, and vermin. At least monthly. The pest-control program includes preventative spraying for indigenous insects. 	\boxtimes			Pest control services are provided on a monthly basis by Gafford Pest Control Co.
☐ ACCEPTABLE ☐ DEFICIENT ☐	AT-RIS	K		REPEAT FINDING

REMARKS: There is no policy or system for maintaining inventories of hazardous materials.

Recommend MSDS books throughout the facility be reviewed and updated to ensure current material safety data sheets are in place. Personal protective equipment (eye protection) needs to be available for detainees in the laundry.

Posted exit/evacuation diagrams do not contain locations of emergency equipment. Several of them were also not posted in Spanish. Basic cleaning procedures are in place, however a number of showers were in poor physical repair and sanitary condition. Many shower ceiling areas were deterorating and in poor repair. The shower in B-4 appeared to have mold on the ceiling. Ceilings in the annex dorms had peeling paint. Sanitation throughout the facility was fair.

A Lubbock State Fire Marshal inspection was conducted on December 7, 2007. The facility is conducting fire drills on each shift every month. A total of 22 self-contained breathing apparatus were located throughout the facility. The SCBA units were inspected by an outside company in 2007. Fire extinguishers and fire hoses are also in place throughout the jail. The facility fire pump and the sprinkler system were also inspected in September, 2007. The smoke detection system is being tested on a monthly basis and the alarm system was tagged current in 2007.

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HOLD ROOMS IN DETENTION FACILITIES						
POLICY: HOLD ROOMS WILL BE USED ONLY FOR TEMPORARY DETENTION OF DETAINEES AWAITING REMOVAL, TRANSFER, EOIR HEARINGS, MEDICAL TREATMENT, INTRA-FACILITY MOVEMENT, OR OTHER PROCESSING INTO OR OUT OF THE FACILITY.						
COMPONENTS	Y	N	NA	REMARKS		
The hold rooms are situated within the secure perimeter.	\boxtimes			The Hold Rooms are located in intake screening area.		
The hold rooms are well ventilated well lighted, and all activating switches are located outside the room.	\boxtimes			The Hold Rooms conform to ICE standard requirements.		
The hold rooms contain sufficient seating for the number of detainees held.	\boxtimes					
The walls and ceilings of the hold rooms are tamper and escape proof.	\boxtimes					
Individuals are not held in hold rooms for more than 12 hours.	\boxtimes			Interview with the intake supervisor revealed that detainees are not held in Hold Rooms for more that 12 hours.		
Male and females are segregated from each other.	\boxtimes			Observation revealed that male and females are segregated from each other.		
Detainees under the age of 18 are not held with adult detainees.						
In older facilities, officers are within visual or audible range to allow detainees access to toilet facilities on a regular basis.						
All detainees are given a pat down search for weapons or contraband before being placed in the room.				Observation of the intake process verified each detainee is subjected to a pat search prior to placement in a Hold Room.		
Officers closely supervise the detention hold rooms using direct supervision (Irregular visual monitoring.). • Hold rooms are irregularly monitored every 15 minutes. • Unusual behavior or complaints are noted.				In addition to staff supervision of hold room, digital video monitoring surveillance and recording is conducted.		
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

An inspection of the hold rooms, which are located in the intake area, revealed the rooms are constructed and managed in accordance with policy and accepted practices. Male and female detainees are placed in separate holding rooms. While this is an adult facility, in the event a juvenile were to be discovered during intake screening, he/she would be separated from adults.

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KEY AND LOCK CONTROL (SECURITY, ACCOUNTABILITY AND MAINTENANCE)

POLICY IT IS THE POLICY OF THE ICE SERVICE TO MAINTAIN AN EFFICIENT SYSTEM FOR THE USE, ACCOUNTABILITY AND MAINTENANCE OF ALL KEYS AND LOCKS

COMPONENTS	Y	N	NA	REMARKS
Facility policies and procedures address the issue of compromised keys and locks.				Lubbock County Detention Center, Policy and Procedure Manual, Facility Keys, section 11.03 does not address the issue of compromised keys and locks.
Padlocks and/or chains are prohibited from use on cell doors.				
The entrance/exit door locks to detainee living quarters, or areas with an occupant load of 50 or more people, conform to: Occupational Safety and Environmental Health Manual, Ch. 3; National Fire Protection Association Life Safety Code 101.				
Emergency keys are available for all areas of the facility.				Emergency keys are available. However, these keys are on supervisory staff key ring.
The facilities use a key accountability system.				The facility does not have a key accountability system for all keys in use. Lubbock County Detention Center, Policy and Procedure Manual, Facility Keys, section 11.03,E states, "Carry all keys in a manner, which provides for secure fastening to the officer's person." Reviewers observed supervisory staff keys in desk drawers and in a box in the lieutenant's office. Prison keys to the Jail Annex were located a in a tool cart in the maintenance shop.
Authorization is necessary to issue any restricted key.				
Individual gun lockers are provided. • They are located in an area that permits constant officer observation. • In an area that does not allow detainee or public access.				
All staff members are trained and held responsible for adhering to proper procedures for the handling of keys. • Issued keys are returned immediately in the event an employee inadvertently carries a key ring home. • When a key or key ring is lost, misplaced, or not accounted for, the shift supervisor is immediately notified. • Detainees are not permitted to handle keys assigned to staff.	\boxtimes			Interviews with staff revealed key control training is provided during Basic Jail Training.
☐ ACCEPTABLE ☐ DEFICIENT ☐	AT-RIS	K		REPEAT FINDING

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POPULATION	COUNTS	3		
POLICY: ALL DETENTION FACILITIES SHALL ENSURE AROUND-THE-CLOCK CONDUCT AT LEAST ONE FORMAL COUNT OF THE DETAINEE POPULATION CONDUCTED AS NECESSARY.				
COMPONENTS	Y	N	NA	REMARKS
Staff conduct a formal count at least once each shift.				The facility conducts two formal counts per shift.
Activities cease or are strictly controlled while a formal count is being conducted.	\boxtimes			
Formal counts in all units take place simultaneously.				
Detainee participation in counts is prohibited.				
Officers positively identify each detainee before counting him/her as present.	\boxtimes			
Officers positively identify each detainee before counting him/her as present.				
Written procedures cover informal and emergency counts. • They are followed during informal counts and emergencies.	\boxtimes			
The control officer (or other designated position) maintains an out -count record of all detainees temporarily leaving the facility.				The jail booking computerized system logs all detainees temporarily leaving the facility.
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING				

Count procedures at the facility are appropriate and are in line with effective accountability practices. The number of counts performed appears to be adequate to ensure detainees are accounted for. During this review the team members observed staff in the housing units as they conduct the formal count on May 19, 2008. No concerns were noted. Count practices were consistent with established ICE standards.

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SECURITY INSPECTIONS						
POLICY: POST ASSIGNMENTS IN THE FACILITY'S HIGH-RISK AREAS, WHERE SPECIAL SECURITY PROCEDURES MUST BE FOLLOWED, WILL BE						
RESTRICTED TO EXPERIENCED PERSONNEL WITH A THOROUGH GROUNDING COMPONENTS	YES	NO NO	NA NA	REMARKS		
The facility has a comprehensive security inspection policy.						
Every officer is required to conduct a security check of his/her assigned area. The results are documented.		Ó		Standards lanuage in Lubbock County Jail Policy and Procedures: section 11.01, Facility Security, direct assigned staff to conduct a security inspection of their area upon assuming the post.		
The front-entrance officer checks the ID of everyone entering or exiting the facility.	\boxtimes					
Every Control Center officer receives specialized training.	\boxtimes			On the job training is provided.		
The Control Center is staffed around the clock.	\boxtimes					
Policy restricts staff access to the Control Center.	\boxtimes					
Detainees are restricted from access to the Control Center.	\boxtimes					
Officers monitor all vehicular traffic entering and leaving the facility.	\boxtimes			Digital video monitoring and recording is conducted by central control. Lubbock County Detention Center operates the vehicular gate via surveillance camera and microphone box. The Control Center staff monitors this area.		
The facility maintains a log of all incoming and departing vehicles to sensitive areas of the facility.				Lubbock County Detention Center operates the vehicular gate via surveillance camera and microphone box. The Control Center staff monitors this area.		
Officers thoroughly search each vehicle entering and leaving the facility.	\boxtimes			The vehicles which enter the facility via the vehicle gate are primarily law enforcement vehicles.		
Every search of the SMU and other housing units is documented.	\boxtimes					
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING						

Lubbock County Detention Center operates the vehicular gate via surveillance camera and microphone box. The Control Center staff monitor this area. The vehicles which enter the facility via the vehicle gate are primarily law enforcement vehicles. The facility has developed an acceptable system of security inspections. Inspections are performed throughout all shifts and results are documented in jail booking computerized system.

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SPECIAL MANAGEMENT UNIT (SMU) ADMINISTRATIVE SEGREGATION

POLICY: THE SPECIAL MANAGEMENT UNIT REQUIRED IN EVERY FACILITY ISOLATES CERTAIN DETAINES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL CONSIST OF TWO SECTIONS. ONE, ADMINISTRATIVE SEGREGATION, HOUSES DETAINESS ISOLATED FOR THEIR OWN PROTECTION; THE OTHER FOR DETAINESS BEING DISCIPLINED FOR WRONGDOING (SEE THE "SPECIAL MANAGEMENT UNIT IDISCIPLINARY SEGREGATION!" STANDARD).

COMPONENTS	Y	N	NA	REMARKS
The Administrative Segregation unit provides non-punitive protection from the general population and individuals undergoing disciplinary segregation. • Detainees are placed in the SMU (administrative) in accordance with written criteria.	\boxtimes			Lubbock County Detention Center, Policy and Procedure Manual, Inmate Disciplinary Procedures, section 13.01, addresses criteria for placing detainee in administrative segregation and disciplinary segregation.
In exigent circumstances, staff may place a detainee in the SMU (administrative) before a written order has been approved. • A copy of the order given to the detainee within 24 hours.	\boxtimes			
Administratively segregated detainees enjoy the same general privileges as detainees in the general population.	\boxtimes			
The SMU is: Well ventilated; Adequately lighted; Appropriately heated; and Maintained in a sanitary condition.				
All cells are equipped with beds. • Every bed is securely fastened to the floor or wall.	\boxtimes			
The number of detainees in any cell does not exceed the occupancy limit.	\boxtimes			
Detainees receive three nutritious meals per day, from the general population's menu of the day.				
Each detainee maintains a normal level of personal hygiene in the SMU.	\boxtimes			
A health care professional visits every detainee at least three times a week.				A review of the jail booking computerized system revealed the unit is visited twice each shift.
The SMU maintains a permanent log of detainee-related activity, e.g., meals served, recreation, visitors etc.				A review of the jail booking computerized system revealed detainees activities are logged.
Staff record whether the detainee ate, showered, exercised, and took any applicable medication during every shift.				
ACCEPTABLE DEFICIENT	AT-RE	SK		REPEAT FINDING

REMARKS:

The Lubbock County Detention Center has a Special Management Unit which isolates certain detainees from the general population. It consists of two sections. One, Administrative Segregation, houses detainees isolated for their own protection. The other is for detainees being segregated for disciplinary reasons. Observation of the SMU revealed it is quiet and operated efficiently. Files are maintained using the jail booking computerized system.

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SPECIAL MANAGEMENT UNIT DISCIPLINARY SEGREGATION

POLICY: EACH FACILITY WILL ESTABLISH A SPECIAL MANAGEMENT UNIT IN WHICH TO ISOLATE CERTAIN DETAINEES FROM THE GENERAL POPULATION. THE SPECIAL MANAGEMENT UNIT WILL HAVE TWO SECTIONS, ONE FOR DETAINEES IN ADMINISTRATIVE SEGREGATION; THE OTHER FOR DETAINEES BEING SEGREGATED FOR DISCIPLINARY REASONS.

COMPONENTS	Y	N	NA	REMARKS	
Officers placing detainees in disciplinary segregation follow written procedures.	\boxtimes				
A completed Disciplinary Segregation Order accompanies the detainee into the SMU.	\boxtimes				
Standard procedures include reviewing the cases of individual detainees housed in disciplinary segregation at set intervals.	\boxtimes			The Classification Officer conducts set interval reviews of every detainee placed in disciplinary segregation.	
The conditions of confinement in the SMU are proportional to the amount of control necessary to protect detainees and staff.	\boxtimes				
All cells are equipped with beds that are securely fastened to the floor or wall of the cell.	\boxtimes				
When a detainee is segregated without clothing, mattress, blanket, or pillow (in a dry cell setting), a justification is made and the decision is reviewed each shift. Items are returned as soon as it is safe.					
Detainees in the SMU receive three nutritious meals per day, selected from the Food Service's menu of the day.					
Detainees are allowed to maintain a normal level of personal hygiene, including the opportunity to shower and shave at least three times/week.	\boxtimes				
A health care professional visits every detainee in disciplinary segregation every week day.	\boxtimes			Medical staff was observed passing out medication.	
All detainee-related activities are documented, e.g. meals served, recreation activities, visitors, etc.	\boxtimes			The jail booking system is used to log detainees' activities.	
 SMU staff record whether the detainee ate, showered, exercised, took medication, etc. Details about the detainee logged, e.g., a medical condition, suicidal/violent behavior, etc. 	\boxtimes	,			
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING					

REMARKS:

Disciplinary Segregation is operated efficiently and was consistent with established ICE standards. Detainees are afforded the same rights and privileges, on a limited basis, as the general population. Interviews with detainees confined in the SMU revealed they have no complaints and believe they are treated with dignity and respect.

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TOOL CONTROL				
POLICY: IT IS THE POLICY OF ALL FACILITIES THAT ALL EMPLOYEES SHALL I THE MAINTENANCE SUPERVISOR SHALL MAINTAIN A COMPUTER GENERA EQUIPMENT AND THE LOCATION IN WHICH TOOLS ARE STORED. THESE INVE TOOL INVENTORY AND ACCOUNTABILITY DURING AN AUDIT.	TED OR TY	PEWRITT	EN MAS	TER INVENTORY LIST OF TOOLS AND
COMPONENTS	Y	N	NA	REMARKS
The facility has a tool classification system. Tools are classified according to: Restricted (dangerous/hazardous); and Non-Restricted (non-hazardous).				The facility does not have a tool classification system.
Each facility has procedures for the issuance of tools to staff and detainees.				Lubbock County Detention Center, Maintenance Tool Policy, states, "A chit system will be used for checking out tools." However, a 12 inch 4 sided filed used to sharpen knives was located in food service knife drawer. The file was not noted on any inventory or issued from the maintenance shop.
ACCEPTABLE DEFICIENT AT-RISK REPEAT FINDING				

The facility does not have a tool classification system. Tools are not classified according to Restricted (dangerous/hazardous); and non-Restricted (non-hazardous). A 12 inch 4 sided file used to sharpened knives was located in food service knife draw. The file was not inventory or issued from the maintenance shop.

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TRANSPORTATION LAND TRANSPORTATION

POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES, SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL.

STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.

COMPONENTS	YES	No	NA	REMARKS
Transporting officers comply with applicable local, state, and federal motor vehicle laws and regulations. Records support this finding of compliance.				
Every transporting officer required to drive a commercial size bus has a valid Commercial Driver's License (CDL) issued by the state of employment.				
Supervisors maintain records for each vehicle operator.				
 Officers use a checklist during every vehicle inspection. Officers report deficiencies affecting operability; and Deficiencies are corrected before the vehicle goes back into service. 				. 1
 Transporting officers: Limit driving time to 10 hours in any 15 hour period; Drive only after eight consecutive off-duty hours; Do not receive transportation assignments after having been on duty, in any capacity, for 15 hours; Drive a 50-hour maximum in a given work week; a 70-hour maximum during eight consecutive days; During emergency conditions (including bad weather), officers may drive as long as necessary and safe to reach a safe area—exceeding the 10-hour limit. 				
 Two officers with valid CDLs required in any bus transporting detainees. When buses travel in tandem with detainees, there are two qualified officers per vehicle. An unaccompanied driver may transport an empty vehicle. 				
Before the start of each detail, the vehicle is thoroughly searched.				
Positive identification of all detainees being transported is confirmed.				
All detainees are searched immediately prior to boarding the vehicle by staff controlling the bus or vehicle.				
The facility ensures that the number of detainees transported does not exceed the vehicles manufacturer's occupancy level.				
Protective vests are provided to all transporting officers.				
The vehicle crew conducts a visual count once all passengers are on board and seated. • Additional visual counts are made whenever the vehicle makes a scheduled or unscheduled stop.				
Policies and procedures are in place addressing the use of restraining equipment on transportation vehicles.				
Officers ensure that no one contacts the detainees. • One officer remains in the vehicle at all times when detainees are present.				

TRANSPORTATION LAND TRANSPORTATION

POLICY: THE IMMIGRATION AND NATURALIZATION SERVICE WILL TAKE ALL NECESSARY PRECAUTIONS TO PROTECT THE LIVES, SAFETY, AND WELFARE OF OUR OFFICERS, THE GENERAL PUBLIC, AND THOSE IN ICE CUSTODY DURING THE TRANSPORTATION OF DETAINEES. STANDARDS HAVE BEEN ESTABLISHED FOR PROFESSIONAL TRANSPORTATION UNDER THE SUPERVISION OF EXPERIENCED AND TRAINED DETENTION ENFORCEMENT OFFICERS OR AUTHORIZED CONTRACT PERSONNEL.

STANDARD NA: CHECK THIS BOX IF ALL ICE TRANSPORTATION IS HANDLED ONLY BY THE ICE FIELD OFFICE OR SUB-OFFICE IN CONTROL OF THE DETAINEE CASE.

COMPONENTS	YES	No	NA	REMARKS
Meals are provided during long distance transfers. The meals meet the minimum dietary standards, as identified by dieticians utilized by ICE.				
The vehicle crew inspects all Food Service pickups before accepting delivery (food wrapping, portions, quality, quantity, thermos-transport containers, etc.). • Before accepting the meals, the vehicle crew raises and resolves questions, concerns, or discrepancies with the Food Service representative; • Basins, latrines, and drinking-water containers/dispensers are cleaned and sanitized on a fixed schedule.				
Vehicles have:				
The vehicles are clean and sanitary at all times.				
Personal property of a detainee transferring to another facility is: Inventoried; Inspected; and Accompanies the detainee.				
The following contingencies are included in the written procedures for vehicle crews: • Attack • Escape • Hostage-taking • Detainee sickness • Detainee death • Vehicle fire • Riot • Traffic accident • Mechanical problems • Natural disasters • Severe weather • Passenger list includes women or minors				
ACCEPTABLE DEFICIENT	AT-RISH	<		REPEAT FINDING

Immigration and Customs Enforcement will provide transportation for ICE detainees housed in the Lubbock County Jail.

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POLICY: THE U.S. DEPARTMENT OF HOMELAND SECURITY AUTHORIZES THE USE OF FORCE ONLY AS A LAST ALTERNATIVE AFTER ALLOTHER REASONABLE EFFORTS TO RESOLVE A SITUATION HAVE FAILED. ONLY THAT AMOUNT OF FORCE NECESSARY TO GAIN CONTROL OF THE DETAINEE, TO PROTECT AND ENSURE THE SAFETY OF DETAINEES, STAFF AND OTHERS, TO PREVENT SERIOUS PROPERTY DAMAGE AND TO ENSURE INSTITUTION SECURITY AND GOOD ORDER MAY BE USED. PHYSICAL RESTRAINTS NECESSARY TO GAIN CONTROL OF A DETAINEE WHO APPEARS TO BE DANGEROUS MAY BE EMPLOYED WHEN THE DETAINEE:

COMPONENTS	YES	No	NA	REMARKS
There is a use of force policy outlining immediate and calculated use of force, and confrontation avoidance.		\boxtimes		Lubbock County Detention Center, Policy and Procedure Manual, Use Of Force, section 2.08, does not outline immediate and calculated use of force, and confrontation avoidance.
Staff members are trained in the performance of the Use-of-Force Team Technique.	\boxtimes			Staff received training during Basic Jail Training, and the Detention Response Team train once a month.
All use-of-force incidents are documented and reviewed.	\boxtimes			
Staff: Do not use force as punishment; Attempt to gain the detainee's voluntary cooperation before resorting to force; Use only as much force as necessary to control the detainee; and				
Medication may only be used for restraint purposes when authorized by the Medical Authority as medically necessary.	\boxtimes			
In immediate-use-of-force situations, staff contacts medical staff once the detainee is under control.	\boxtimes	Û		A review of a use-of force incident videotape indicates medical staff was present.
Special precautions are taken when restraining pregnant detainees. • Medical personnel are consulted	\boxtimes			
The officers are thoroughly trained in the use of soft and hard restraints.	\boxtimes			
For incidents involving calculated use of force, a videotape is made and retained for review.	\boxtimes			
ACCEPTABLE DEFICIENT	AT-RISI	K		REPEAT FINDING

REMARKS:

Lubbock County Detention Center Policy and Procedure Manual, Use of Force, section 2.08, does not outline immediate and calculated use of force, and confrontation avoidance.

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STAFF DETAINEE COMMUNICATIONS POLICY: PROCEDURES MUST BE IN PLACE TO ALLOW FOR FORMAL AND INFORMAL CONTACT BETWEEN KEY FACILITY STAFF AND ICE STAFF AND ICE DETAINEE AND TO PERMIT DETAINEES TO MAKE WRITTEN REQUESTS TO ICE STAFF AND RECEIVE AN ANSWER IN AN ACCEPTABLE TIME FRAME. COMPONENTS NA REMARKS ICE information request Forms are available at the IGSA for use by ICE The facility did not have ICE information request forms for the detainees. detainee population. The local X ICE Deportation Officer was notified and provided appropriate ICE information forms to the facility during the review. The IGSA treats detainee correspondence to ICE staff as Special Detainee correspondence to ICE X Correspondence. is treated as special correspondence. **ACCEPTABLE** DEFICIENT AT-RISK REPEAT FINDING

REMARKS:

The facility did not have ICE information request forms for the detainee population. The local ICE Deportation Officer was notified and provided appropriate ICE information forms to the facility during the review. Detainee correspondence to ICE is treated as special correspondence. Communication between the staff and detainees was good.

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DETAINEE TRANSFER STANDARD

POLICY: ICE WILL MAKE ALL NECESSARY NOTIFICATIONS WHEN A DETAINEE IS TRANSFERRED. IF A DETAINEE IS BEING TRANSFERRED VIA THE JUSTICE PRISONER ALIEN TRANSPORTATION SYSTEM (JPATS), ICE WILL ADHERE TO JPATS PROTOCOLS. IN DECIDING WHETHER TO TRANSFER A DETAINEE, ICE WILL TAKE INTO CONSIDERATION WHETHER THE DETAINEE IS REPRESENTED BEFORE THE IMMIGRATION COURT. IN SUCH CASES, THE FIELD OFFICE DIRECTOR WILL CONSIDER THE DETAINEE'S STAGE WITHIN THE REMOVAL PROCESS, WHETHER THE DETAINEE'S ATTORNEY IS LOCATED WITHIN REASONABLE DRIVING DISTANCE OF THE FACILITY, AND WHERE THE IMMIGRATION COURT PROCEEDINGS ARE TAKING PLACE.

COMPONENTS	Y	N	NA	REMARKS
 When a detainee is represented by legal counsel or a legal representative, and a G-28 has been filed, the representative of record is notified by the detainee's Deportation Officer. The notification is recorded in the detainee's file; and When the A File is not available, notification is noted within DACS 				
Notification includes the reason for the transfer and the location of the new facility.	\boxtimes			
The deportation officer is allowed discretion regarding the timing of the notification when extenuating circumstances are involved.	\boxtimes			
The attorney and detainee are notified that it is their responsibility to notify family members regarding a transfer.	\boxtimes			
 Facility policy mandates that: Times and transfer plans are never discussed with the detainee prior to transfer; The detainee is not notified of the transfer until immediately prior to departing the facility; and The detainee is not permitted to make any phone calls or have contact with any detainee in the general population. 	\boxtimes			
The detainee is provided with a completed Detainee Transfer Notification Form.	\boxtimes			n a G
Form G-391 or equivalent authorizing the removal of a detainee from a facility is used.	\boxtimes			
For medical transfers: • The Detainee Immigration Health Service (or IGSA) (DIHS) Medical Director or designee approves the transfer; • Medical transfers are coordinated through the local ICE office; and • A medical transfer summary is completed and accompanies the detainee.	\boxtimes			
Detainees in ICE facilities having DIHS staff and medical care are transferred with a completed transfer summary sheet in a sealed envelope with the detainee's name and A-number, and the envelope is marked Medical Confidential.	\boxtimes			
For medical transfers, transporting officers receive instructions regarding medical issues.				
Detainee's funds, valuables, and property are returned and transferred with the detainee to his/her new location.	\boxtimes			II.
Transfer and documentary procedures outlined in Section C and D are followed.	\boxtimes			
Meals are provided when transfers occur during normally schedule meal times.	\boxtimes			

DETAINEE TRANSFER STANDARD POLICY: ICE WILL MAKE ALL NECESSARY NOTIFICATIONS WHEN A DETAINEE IS TRANSFERRED. IF A DETAINEE IS BEING TRANSFERRED VIA THE JUSTICE PRISONER ALIEN TRANSPORTATION SYSTEM (JPATS), ICE WILL ADHERE TO JPATS PROTOCOLS. IN DECIDING WHETHER TO TRANSFER A DETAINEE, ICE WILL TAKE INTO CONSIDERATION WHETHER THE DETAINEE IS REPRESENTED BEFORE THE IMMIGRATION COURT. IN SUCH CASES, THE FIELD OFFICE DIRECTOR WILL CONSIDER THE DETAINEE'S STAGE WITHIN THE REMOVAL PROCESS, WHETHER THE DETAINEE'S ATTORNEY IS LOCATED WITHIN REASONABLE DRIVING DISTANCE OF THE FACILITY, AND WHERE THE IMMIGRATION COURT PROCEEDINGS ARE TAKING PLACE. COMPONENTS NA REMARKS An A File or work folder accompanies the detainee when transferred to a X different field office or sub-office. Files are forwarded to the receiving office via overnight mail no later than one business day following the transfer. \boxtimes \Box **ACCEPTABLE** DEFICIENT AT-RISK REPEAT FINDING

REMARKS:

All ICE detainees are evaluated, approved and transported by ICE staff or GEO Staff. ICE detainees are released only to the custody of ICE officials.

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